

House Rejects Most TRICARE Fee Hikes; Blocks Attempts to Stop Increases in Prescription Drug Co-Pays for Veterans

Washington, DC – As thousands of American veterans return home from service in Iraq and Afghanistan or rotate into active duty overseas, the United States House of Representatives today took one step forward and one step back in fulfilling America's commitment to the men and women who've served in our armed forces – stopping steep increases in TRICARE fees and premiums, but blocking attempts to stop an increase in the prescription co-payments veterans are charged at their local pharmacies.

"Teddy Roosevelt said that a man who's good enough to shed his blood for his country is good enough to be given a square deal afterwards," Barrow said. "Well today, the House of Representatives gave our veterans a lousy deal – turning its back on the promises our country has made over the years."

The National Defense Authorization Act (H.R. 5122), which today passed the House of Representatives by a margin of 396 to 31, stopped the proposed increases in fee and premiums for TRICARE, the military's managed care program. But the House blocked attempts to stop proposed increases in veterans' prescription drug premiums – first in the Armed Services Committee, then in the Rules Committee, and then on the House floor.

"For the past few months, some of us in Congress have fought to stop these hikes in the cost of veterans health insurance," Barrow continued. "I'm glad that the House flatly rejected attempts to double and triple premiums and fees, but it's disappointing that similar attempts to stop increases in prescription drug co-payments were repeatedly blocked. When it comes to providing the health care coverage they were promised, we owe America's veterans more than only meeting them half way."

In February, the Department of Defense (DOD) announced that, for the first time, it would increase annual enrollment fees for TRICARE Prime, the military's managed care option – doubling the fees for retired enlisted men and women and tripling those fees for retired officers. Also for the first time, retirees who use TRICARE Standard would pay an annual enrollment fee in addition to their deductible.

H.R. 5122 stops the proposed increase for at least the next fiscal year, and creates an independent task force, headed by the Government Accountability Office and the Congressional Budget Office, to study the necessity of any increases in TRICARE premiums and fees. The study would examine the financial effect any such increase would have on the millions of American veterans enrolled in the program – many of whom are on fixed incomes.

In its current form, H.R. 5122 does not stop the DOD's proposed increase in TRICARE's prescription co-payments. Those increases only apply to drugs purchased at local pharmacies. The measure attempts to encourage TRICARE enrollees under the age of 65 to use the mail-order program for prescription drugs.

Barrow opposes increases in prescription drug co-payments for veterans, especially when those increases are intended to limit access to local pharmacists. Barrow believes more research is necessary to determine how many veterans are able to effectively use the mail-order program to receive prescription drugs, and he's confident that such a study would show that many veterans couldn't get their drugs when they need them if they're forced get them through the mail.

"These prescription drug price increases are not only mean, they're just plain dumb," Barrow said. "Raising the co-payment is the equivalent of a tax increase on veterans – and those who've blocked our efforts to stop these increases are sticking it to sick veterans."

Several attempts to stop those proposed increases were blocked in committee. A companion bill is being considered in the United States Senate, and it's possible that the prescription drug increase may be removed before the final version of the bill goes to the President for his signature.

In February, Barrow held eight town hall meetings with veterans from across the 12th District to discuss the issues and concerns they would like to see Congress address. At each of the meetings, the rising cost of TRICARE premiums and fees was the number one topic raised by veterans.

After the tour, Barrow became an original cosponsor of the Military Retirees' Health Care Protection Act (H.R. 4949), which would require that any and all future increases in military healthcare fees receive explicit approval from Congress before being implemented – a full up or down vote by both chambers of Congress. Under current law, the Department of Defense has authority to increase TRICARE fees and premiums without getting permission from Congress.

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